

Wisconsin Child Care Regulatory System

RACINE County CERTIFIED Child Care Directory as of 2/4/17

| | | | | | |
|------------------------|--|------------------------|-------------------|---------------------------|------------------------------------|
| Facility Name | ANTONIA BUENO | Contact | BUENO, ANTONIA | Full Time | Y |
| Address | 1037 Park Ave Racine, Wi 53403-1842 | Phone # | 262-344-9363 | CERTIFIED Capacity | 3 |
| Category | PROVISIONAL CERTIFIED | CERTIFIED Date | 08/01/2011 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | - | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 9000585889 | Hours | 05:30 AM-09:30 PM | Star Level | 2 Stars |
| | | Location Number | 002 | | |
| Facility Name | BERNICE MCKINNEY | Contact | MCKINNEY, BERNICE | Full Time | Y |
| Address | 1232 Arthur Ave Racine, Wi 53405-2926 | Phone # | 262-681-2072 | CERTIFIED Capacity | 3 |
| Category | PROVISIONAL CERTIFIED | CERTIFIED Date | 11/18/2013 | From Age | 5 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | - | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 7000588037 | Hours | 07:00 AM-11:00 PM | Star Level | 2 Stars |
| | | Location Number | 001 | | |
| Facility Name | CARE-A-LOT DAY CARE | Contact | GANAWAY, HEIDI C | Full Time | Y |
| Address | 1637 Grange Ave Racine, Wi 53405-3539 | Phone # | 262-634-7360 | CERTIFIED Capacity | 3 |
| Category | PROVISIONAL CERTIFIED | CERTIFIED Date | 03/19/2009 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | - | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 9000584649 | Hours | 06:30 AM-05:30 PM | Star Level | Unknown |
| | | Location Number | 001 | | |
| Facility Name | DOREEN MAE LEE | Contact | LEE, DOREEN M | Full Time | Y |
| Address | 3300 Debra Ln Racine, Wi 53403-3568 | Phone # | 262-554-5248 | CERTIFIED Capacity | 3 |
| Category | PROVISIONAL CERTIFIED | CERTIFIED Date | 12/18/2009 | From Age | 1 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | - | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 5000585415 | Hours | 07:30 AM-04:30 PM | Star Level | 2 Stars |
| | | Location Number | 001 | | |
| Facility Name | IESHA ALLEN | Contact | ALLEN, IESHA W | Full Time | Y |
| Address | 1812 Clayton Ave Upper Racine, Wi 53404 | Phone # | 262-800-3670 | CERTIFIED Capacity | 3 |
| Category | PROVISIONAL CERTIFIED | CERTIFIED Date | 03/21/2013 | From Age | 0 Year(s), 0 Month(s), 3 Week(s) |
| Facility ID | - | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 6000587746 | Hours | -06:30 AM | Star Level | Unknown |
| | | Location Number | 001 | | |

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|------------------------|---|------------------------|--------------------|---------------------------|------------------------------------|
| Facility Name | KNECHT CARE | Contact | KNECHT, LAKEYSHA R | Full Time | Y |
| Address | 2409 Anthony Ln 12 Racine, Wi 53404-1776 | Phone # | 262-417-3326 | CERTIFIED Capacity | 3 |
| Category | PROVISIONAL CERTIFIED | CERTIFIED Date | 03/09/2016 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | - | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 1000586771 | Hours | 04:30 PM-01:30 AM | Star Level | 2 Stars |
| | | Location Number | 003 | | |
| Facility Name | LESLIE DOREEN SPIVEY | Contact | SPIVEY, LESLIE D | Full Time | Y |
| Address | 1536 Flett Ave Racine, Wi 53405-5040 | Phone # | 262-752-6821 | CERTIFIED Capacity | 3 |
| Category | PROVISIONAL CERTIFIED | CERTIFIED Date | 06/21/2013 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | - | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 3000587863 | Hours | 06:30 AM-10:30 PM | Star Level | 2 Stars |
| | | Location Number | 001 | | |
| Facility Name | LIGHTHOUSE CHILD CARE | Contact | RIVERA, DEBRA A | Full Time | Y |
| Address | 1835 Blake Ave Racine, Wi 53404 | Phone # | 262-412-6840 | CERTIFIED Capacity | 3 |
| Category | PROVISIONAL CERTIFIED | CERTIFIED Date | 03/02/2001 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | - | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 6000566256 | Hours | 08:00 AM-11:59 PM | Star Level | Unknown |
| | | Location Number | 001 | | |
| Facility Name | LINDA SUE WADE | Contact | WADE, LINDA S | Full Time | Y |
| Address | 1504 Park Ave Racine, Wi 53403-2720 | Phone # | 262-664-1260 | CERTIFIED Capacity | 3 |
| Category | PROVISIONAL CERTIFIED | CERTIFIED Date | 06/09/2011 | From Age | 1 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | - | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 3000557653 | Hours | -05:30 AM | Star Level | 2 Stars |
| | | Location Number | 002 | | |
| Facility Name | LUCY L HAWKINS | Contact | HAWKINS, LUCY L | Full Time | Y |
| Address | 3800 Monarch Dr 1 Racine, Wi 53406 | Phone # | 262-883-5019 | CERTIFIED Capacity | 3 |
| Category | PROVISIONAL CERTIFIED | CERTIFIED Date | 03/04/2016 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | - | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 0000588800 | Hours | 06:45 AM-10:45 PM | Star Level | 2 Stars |
| | | Location Number | 001 | | |

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|------------------------|--|------------------------|-----------------------|---------------------------|------------------------------------|
| Facility Name | NAKESHA SMITH | Contact | SMITH, NAKESHA N | Full Time | Y |
| Address | 1511 Maple St Racine, Wi 53404 | Phone # | 773-354-0941 | CERTIFIED Capacity | 3 |
| Category | PROVISIONAL CERTIFIED | CERTIFIED Date | 09/15/2016 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | - | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 2000588972 | Hours | 01:30 PM-10:30 PM | Star Level | Unknown |
| | | Location Number | 001 | | |
| Facility Name | NICHOLE SERVANTEZ | Contact | SERVANTEZ, NICHOLE D | Full Time | Y |
| Address | 1219 Layard Ave Racine, Wi 53402 | Phone # | 262-221-4103 | CERTIFIED Capacity | 3 |
| Category | PROVISIONAL CERTIFIED | CERTIFIED Date | 03/05/2008 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | - | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 0000576310 | Hours | 05:30 AM-09:30 PM | Star Level | 2 Stars |
| | | Location Number | 003 | | |
| Facility Name | TERRI SMITH MANDLI | Contact | SMITH MANDLI, TERRI A | Full Time | Y |
| Address | 5510 College Point Ct Racine, Wi 53402-1916 | Phone # | 262-930-1157 | CERTIFIED Capacity | 3 |
| Category | PROVISIONAL CERTIFIED | CERTIFIED Date | 10/01/2008 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | - | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 3000584293 | Hours | 06:30 AM-10:30 PM | Star Level | 2 Stars |
| | | Location Number | 001 | | |
| Facility Name | VENUS JAMISON | Contact | JAMISON, VENUS M | Full Time | Y |
| Address | 3300 Daisy Ln 2 Racine, Wi 53405-4653 | Phone # | 262-989-8868 | CERTIFIED Capacity | 3 |
| Category | PROVISIONAL CERTIFIED | CERTIFIED Date | 09/23/2010 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | - | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 7000583127 | Hours | 06:00 AM-10:00 PM | Star Level | 2 Stars |
| | | Location Number | 003 | | |

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|------------------------|---|------------------------|----------------------|---------------------------|------------------------------------|
| Facility Name | A CHANCE TO LEARN | Contact | ANDERSON, LASHUNDA M | Full Time | Y |
| Address | 1704 Flett Ave Racine, Wi 53405-3585 | Phone # | 262-672-7621 | CERTIFIED Capacity | 3 |
| Category | REGULAR CERTIFIED | CERTIFIED Date | 07/13/2010 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | - | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 0000582920 | Hours | 07:00 AM-11:00 PM | Star Level | Unknown |
| | | Location Number | 002 | | |
| Facility Name | CONFIDENT KIDS | Contact | INGRAM, TAMESHA | Full Time | Y |
| Address | 2908 Brentwood Dr Racine, Wi 53403-3706 | Phone # | 262-488-3773 | CERTIFIED Capacity | 3 |
| Category | REGULAR CERTIFIED | CERTIFIED Date | 07/10/2014 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | - | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 0000588290 | Hours | -03:00 PM | Star Level | 3 Stars |
| | | Location Number | 001 | | |
| Facility Name | DARLENE MCNEAL | Contact | MCNEAL, DARLENE | Full Time | Y |
| Address | 2540 Rolling Fields Dr Racine, Wi 53406-2261 | Phone # | 262-886-3573 | CERTIFIED Capacity | 3 |
| Category | REGULAR CERTIFIED | CERTIFIED Date | 04/07/2011 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | - | Months | Jan-Dec | To Age | 10 Year(s), 0 Month(s), 0 Week(s) |
| Provider Number | 7000586277 | Hours | -03:30 PM | Star Level | 3 Stars |
| | | Location Number | 001 | | |
| Facility Name | DEBRA'S DAY CARE | Contact | WORTHAM, DEBRA A | Full Time | Y |
| Address | 1744 Mead St Racine, Wi 53403 | Phone # | 262-456-6215 | CERTIFIED Capacity | 3 |
| Category | REGULAR CERTIFIED | CERTIFIED Date | 10/16/2001 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | - | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 2000557422 | Hours | -12:30 AM | Star Level | 2 Stars |
| | | Location Number | 001 | | |
| Facility Name | DIANE IVORY | Contact | IVORY, DIANE M | Full Time | Y |
| Address | 3538 Monarch Dr Racine, Wi 53406 | Phone # | 262-456-7393 | CERTIFIED Capacity | 3 |
| Category | REGULAR CERTIFIED | CERTIFIED Date | 12/06/2009 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Facility ID | - | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 1000580821 | Hours | -08:00 AM | Star Level | Unknown |
| | | Location Number | 004 | | |

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|------------------------|--|------------------------|-----------------------|---------------------------|------------------------------------|
| Facility Name | EARLINE'S FAMILY DAYCARE | Contact | FRAZIER, MARTINIQUE N | Full Time | Y |
| Address | 3240 Indiana St Racine, Wi 53405-4302 | Phone # | 262-883-7594 | CERTIFIED Capacity | 3 |
| Category | REGULAR CERTIFIED | CERTIFIED Date | 05/03/2010 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | - | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 0000580150 | Hours | 07:00 AM-11:00 PM | Star Level | 2 Stars |
| | | Location Number | 003 | | |
| Facility Name | JUST LIKE HOME | Contact | JEANS, EBONY S | Full Time | Y |
| Address | 1200 Howard St Racine, Wi 53404-2816 | Phone # | 262-994-4995 | CERTIFIED Capacity | 3 |
| Category | REGULAR CERTIFIED | CERTIFIED Date | 05/14/2008 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | - | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 2000571052 | Hours | -07:00 AM | Star Level | 2 Stars |
| | | Location Number | 003 | | |
| Facility Name | KATRINA MARQUEZ | Contact | MARQUEZ, KATRINA | Full Time | Y |
| Address | 1025 Yout St Racine, Wi 53402-4641 | Phone # | 262-498-8120 | CERTIFIED Capacity | 3 |
| Category | REGULAR CERTIFIED | CERTIFIED Date | 07/25/2013 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | - | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 9000587939 | Hours | 04:30 AM-08:30 PM | Star Level | 2 Stars |
| | | Location Number | 001 | | |
| Facility Name | KIDDIE CORNER DAYCARE | Contact | ORTA, LISA | Full Time | Y |
| Address | 4124 Olive St Racine, Wi 53405-4006 | Phone # | 262-995-4113 | CERTIFIED Capacity | 3 |
| Category | REGULAR CERTIFIED | CERTIFIED Date | 05/12/2008 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | - | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 7000583767 | Hours | 08:00 AM-05:00 PM | Star Level | 2 Stars |
| | | Location Number | 001 | | |
| Facility Name | KRISTINE SCHWEITZER | Contact | SCHWEITZER, KRISTINE | Full Time | Y |
| Address | 25609 W Loomis Rd Wind Lake, Wi 53185 | Phone # | 262-895-7279 | CERTIFIED Capacity | 3 |
| Category | REGULAR CERTIFIED | CERTIFIED Date | 10/02/2012 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | - | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Provider Number | 1000587581 | Hours | 05:00 AM-09:00 PM | Star Level | 2 Stars |
| | | Location Number | 001 | | |

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|------------------------|---|------------------------|------------------------|---------------------------|------------------------------------|
| Facility Name | LITTLE CHERUBS FROM HEAVEN CHILDCA | Contact | ANDERSON-PAYTON, MELIS | Full Time | Y |
| Address | 3707 Clairmont St Racine, Wi 53406 | Phone # | 262-989-5670 | CERTIFIED Capacity | 3 |
| | | CERTIFIED Date | 06/27/2012 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Category | REGULAR CERTIFIED | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Facility ID | - | Hours | 06:00 AM-10:00 PM | Star Level | 3 Stars |
| Provider Number | 2000580262 | Location Number | 002 | | |
| Facility Name | LOVE AND GRACE DAYCARE | Contact | BARLOW, ESTELLE L | Full Time | Y |
| Address | 1645 Wisconsin Ave Upper Racine, Wi 53403-2729 | Phone # | 262-504-9450 | CERTIFIED Capacity | 3 |
| | | CERTIFIED Date | 01/15/2010 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Category | REGULAR CERTIFIED | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Facility ID | - | Hours | -07:30 AM | Star Level | 2 Stars |
| Provider Number | 9000581609 | Location Number | 004 | | |
| Facility Name | MICHELLE LEE ASBERRY | Contact | ASBERRY, MICHELLE L | Full Time | Y |
| Address | 1949 Jay Eye See Ave Racine, Wi 53403-2447 | Phone # | 262-939-9240 | CERTIFIED Capacity | 3 |
| | | CERTIFIED Date | 06/03/2016 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Category | REGULAR CERTIFIED | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Facility ID | - | Hours | -03:00 PM | Star Level | Unknown |
| Provider Number | 7000588927 | Location Number | 001 | | |
| Facility Name | NICKIE'S DAY CARE | Contact | COSEY, TITANIA N | Full Time | Y |
| Address | 2427 Hayes Ave Racine, Wi 53405 | Phone # | 262-930-3946 | CERTIFIED Capacity | 3 |
| | | CERTIFIED Date | 02/25/2008 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Category | REGULAR CERTIFIED | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Facility ID | - | Hours | 06:00 AM-10:00 PM | Star Level | Unknown |
| Provider Number | 9000576739 | Location Number | 002 | | |
| Facility Name | ROSALYN ROBINSON | Contact | ROBINSON, ROSALYN | Full Time | Y |
| Address | 1130 Main St 109 Racine, Wi 53403 | Phone # | 262-721-6188 | CERTIFIED Capacity | 3 |
| | | CERTIFIED Date | 07/15/2002 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Category | REGULAR CERTIFIED | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Facility ID | - | Hours | 06:00 AM-10:00 PM | Star Level | 2 Stars |
| Provider Number | 0000566860 | Location Number | 001 | | |

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|------------------------|--|------------------------|----------------------|---------------------------|------------------------------------|
| Facility Name | SEKIA'S DAYCARE | Contact | FOSTER, YASHAWNDRA T | Full Time | Y |
| Address | 5910 16th St 101 Racine, Wi 53406 | Phone # | 262-939-5838 | CERTIFIED Capacity | 3 |
| | | CERTIFIED Date | 05/30/2007 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Category | REGULAR CERTIFIED | Months | Jan-Dec | To Age | 13 Year(s), 11 Month(s), 0 Week(s) |
| Facility ID | - | Hours | 07:00 AM-11:00 PM | Star Level | 2 Stars |
| Provider Number | 0000582640 | Location Number | 003 | | |
| Facility Name | STACY MICHELLE LOVE | Contact | LOVE, STACY M | Full Time | Y |
| Address | 1128 Lockwood Ave Racine, Wi 53403-1679 | Phone # | 262-221-1761 | CERTIFIED Capacity | 3 |
| | | CERTIFIED Date | 08/14/2007 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Category | REGULAR CERTIFIED | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Facility ID | - | Hours | 03:00 AM-07:00 PM | Star Level | 2 Stars |
| Provider Number | 5000573265 | Location Number | 002 | | |
| Facility Name | TARIA NICHOLE RILEY | Contact | RILEY, TARIA N | Full Time | Y |
| Address | 1936 Phillips Ave Racine, Wi 53403-2548 | Phone # | 262-880-9497 | CERTIFIED Capacity | 3 |
| | | CERTIFIED Date | 12/27/2011 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Category | REGULAR CERTIFIED | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Facility ID | - | Hours | 03:00 PM-11:00 PM | Star Level | 2 Stars |
| Provider Number | 4000584034 | Location Number | 002 | | |
| Facility Name | TENDER CARE | Contact | BEADLES, SHERRIE L | Full Time | - |
| Address | 1233 Carlisle Ave Racine, Wi 53404 | Phone # | 262-752-8539 | CERTIFIED Capacity | 3 |
| | | CERTIFIED Date | 01/23/2002 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Category | REGULAR CERTIFIED | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Facility ID | - | Hours | 02:30 PM-11:30 PM | Star Level | 2 Stars |
| Provider Number | 0000572600 | Location Number | 001 | | |